

Collecting and Reporting Race, Ethnicity, and Language (REL) Data

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*Hopkins Center for
Health Disparities Solutions*

“Exploration and Intervention for Health Equality...”



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Collecting REL Data: Best Practices

- At a minimum use:
 - Office of Management and Budget, Directive 15, Revisions to the Standards for the Classification of Federal Data on Race and Ethnicity (October 30, 1997)
 - Also required to fulfill meaningful use of EHRs standards
- Federal public health surveys:
 - U.S. Department of Health and Human Services, Office of Minority Health, Section 4302 of the Affordable Care Act



Office of Management and Budget (OMB)

- **Hispanic or Latino:** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term “Spanish origin” can be used in addition to “Hispanic or Latino.”
- **Non-Hispanic or Latino**

Office of Management and Budget (OMB), “Directive No. 15: Race and Ethnic Standards for Federal Statistics and Administrative Reporting,” 1997.



Office of Management and Budget (OMB)

- **American Indian/Alaska Native:** Having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
- **Asian:** Having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- **Black/African American:** Having origins in any of the black racial groups of Africa. Terms such as “Haitian,” “Dominican,” or “Somali” can be used in addition to “Black or African American.”
- **Native Hawaiian/Other Pacific Islander:** Having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- **White:** Having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Office of Management and Budget (OMB), “Directive No. 15: Race and Ethnic Standards for Federal Statistics and Administrative Reporting,” 1997.



Section 4302 of the ACA: Race and Ethnicity Standards

Ethnicity Data Standard

Are you Hispanic, Latino/a, or Spanish origin (One or more categories may be selected)

- a. ☐ *No, not of Hispanic, Latino/a, or Spanish origin*
- b. ☐ *Yes, Mexican, Mexican American, Chicano/a*
- c. ☐ *Yes, Puerto Rican*
- d. ☐ *Yes, Cuban*
- e. ☐ *Yes, Another Hispanic, Latino/a or Spanish origin*

These categories roll-up to the Hispanic or Latino category of the OMB standard

Race Data Standard

What is your race? (One or more categories may be selected)

- a. ☐ *White*
- b. ☐ *Black or African American*
- c. ☐ *American Indian or Alaska Native*

These categories are part of the current OMB standard

- d. ☐ *Asian Indian*
- e. ☐ *Chinese*
- f. ☐ *Filipino*
- g. ☐ *Japanese*
- h. ☐ *Korean*
- i. ☐ *Vietnamese*
- j. ☐ *Other Asian*

These categories roll-up to the Asian category of the OMB standard

- k. ☐ *Native Hawaiian*
- l. ☐ *Guamanian or Chamorro*
- m. ☐ *Samoan*
- n. ☐ *Other Pacific Islander*

These categories roll-up to the Native Hawaiian or Other Pacific Islander category of the OMB standard



Section 4302 of the ACA: Primary Language

Data Standard for Primary Language

How well do you speak English? (5 years old or older)

- a. ☐ *Very well*
- b. ☐ *Well*
- c. ☐ *Not well*
- d. ☐ *Not at all*

1. Do you speak a language other than English at home? (5 years old or older)

- a. ☐ *Yes*
- b. ☐ *No*

For persons speaking a language other than English (answering yes to the question above):

2. What is this language? (5 years old or older)

- a. ☐ *Spanish*
- b. ☐ *Other Language (Identify)*



Collecting REL Data: Best Practices

- Health Research and Education Trust (HRET) Disparities Toolkit
- Institute of Medicine, Race, Ethnicity, and Language Data: Standardization for Health Care Quality Improvement (2009)
- Commission to End Health Care Disparities (CEHCD), Collecting and Using Race, Ethnicity, and Language Data in Ambulatory Settings (2011)
- Equity of Care, Reducing Health Care Disparities: Collection and Use of Race, Ethnicity and Language Data (August 2013)



Collecting REL Data: Best Practices

- Commonwealth of Massachusetts, Implementing New Race, Ethnicity, and Language Data Collection Standards (2006)
- Example of existing training on collecting REL data
 - Marcos Pesquera, Adventist HealthCare, Center on Health Disparities (contracted with HSCRC, MHA, etc. to present 3 trainings to hospital registration staff In 2013)



Collecting REL Data: Best Practices

- Other Recommendations
 - Maryland Health Disparities Collaborative, Research and Evaluation (Data) Workgroup
 - Maryland Health Quality and Cost Council, Cultural and Linguistic Competency Workgroup
 - Charge 2. Assess the feasibility of and develop recommendations for criteria and standards establishing multicultural health care equity and assessment programs for the Maryland Patient-Centered Medical Home (PCMH) program and other health care settings.



Reporting REL Data: Best Practices

- Institute of Medicine, Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care (2002)
- AHRQ National Healthcare Quality and National Healthcare Disparities reports
 - State snapshots of data
- CDC, Health Disparities and Inequalities Report
- DHMH, Office of Minority Health and Health Disparities, Maryland Health Equity Data



Reporting REL Data: Best Practices

- Mass General Disparities Solutions Center, Creating Equity Reports
- National Public Health and Hospital Institute (now America's Essential Hospitals), Assuring Health Equity: A Healthcare Equity Blueprint
- The Commonwealth Fund, Enhancing Public Hospitals' Reporting of Data on Racial and Ethnic Disparities in Care
- Robert Wood Johnson Foundation, Speaking Together: National Language Services Network
 - created 6 quality improvement measures for language access services

